Department of Health Services Toxic Substances Control Division Sacramento, California

WASTE MANIFEST Q a D C		ument No. Halala				by Federal law.
3. Generator's Name and Mailing Address			A. Sta	te Manifest Docum 894	nt Num 70'	ber DAR
Douglas Aircraft Company 19503 S. Normandie Avenue, Tor	rance. CA 90502		B. Sta	te Generator's ID	I UI	
4. Generator's Phone (213) 783-5928 Attr	: R. Tuell M/3 Co-L	0		A H Q 3 6	0 0	5 6 9 8
i. Transporter 1 Company Name	6. US EPA ID Number	9 7 6 7		te Transporter's ID nsporter's Phone	QL	<u>3942 </u>
J.C.I. Environmental Services 7. Transporter 2 Company Name	8. US EPA ID Number	<u> </u>		te Transporter's ID	215 *	200-3107
	10. US EPA ID Number	1.1.1		nsporter's Phone te Facility's ID		
9. Designated Facility Name and Site Address Chem-Tech Systems, Inc.	10. US EPA ID Number		G. Gia			
3650 E. 26th St.				ility's Phone		10 Page 121
Vernon, CA 90023	<u>IGATOSOG3</u>	12. Cont	and the second second	3-268-338) 13. Total	14.	I,
11. US DOT Description (Including Proper Shipping Name, F	lazard Class, and ID Number)	No.	Туре	Quantity	Unit Wt/Vol	
a						State EPAYOther
Non-RCRA, Hazardous Waste Liquoily water & alkaline cleaner	/10 rg)	01011	TiT	MACHOR	G	EPAYOther
D.	West State of the					State**
		111	1			EPA/Other State
o.	4000					EPA/Other
		111		1111		
d.						State
		1 1 1	1	1111		EPA/Other
a) Alkaline cleaning agent 0% Oil & grease 0%-10% water remainder			C. d.			
Tank 10T and 6/85 20 8-3 15. Special Handling Instructions and Additional Information	Claritier				<u> </u>	
Wear gloves and goggles.						
16,						
GENERATOR'S CERTIFICATION: I hereby declare the and are classified, packed, marked, and labeled, and a	at the contents of this consignment ar are in all respects in proper condition	e fully and a or transport	ccuratel by high	y described above way according to a	by prop	er snipping name e international and
national government regulations. If I am a large quantity generator, I certify that I have a to be economically practicable and that I have selecte	program in place to reduce the volum	e and toxici	y of wa	ste generated to th	e degre	e I have determined
to be economically practicable and that I have selecter present and future threat to human health and the envi generation and select the best waste management me	ronment: OR. If I am a small quantity :	generator, i r	iave ma	de a good faith effo	ort to mi	nimize my waste
Printed/Typed Name	Signature					Month Day Yea
Robert G. Tue	11. Jr. Robert	9 07		M. an		10 9 1 9 9
17. Transporter 1 Acknowledgement of Receipt of Material	s Signature	•		7	-	Month Day Yea
Dals Schuss/87	ables	44) ee	<u>le </u>		109199
18. Transporter 2 Acknowledgement of Receipt of Material Printed/Typed Name	s Signature	1				Month Day Yes
				100		11111
19. Discrepancy Indication Space		ř.				
	\$137				100 m	
20. Facility Owner or Operator Certification of receipt of h	azardous materials covered by this m Signature	anifest exce	ot as no	ted in item 19.		Month Day Yes
Printed/Typed Name	Gigliature					

DHS 8022 A (1/88)

CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL R'

EPA 8700—22 (Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

INCORPORATED

Rev; 081789 - PNC

(213) 268-3137

3650 E. 26th STREET LOS ANGELES, CA 90023

4588

EPA NO. **CAD 058018367** FED. TAX NO. **XR 95 - 2769288** WASTE HAULER NO. **139**

BILLING ADDRESS DEPT. LONG B JOB ADDRESS TORRAM ORIGIN COMMODITY MORK RESECRMED	CE TOB R TO CSAL PRIN	CALIF. CALIF. CALIF. CALIF. CALIF. CALIF. CALIF. CALIF. CALIF.	CORP. PERTY	COUM TRU	_ DA _ P.C _ RE _ CC _ PH _ JC _ CC _ PH _ JC _ DE _ M/	D. NUMBER ELEASE NO DNTACT HONE NO DNTACT HONE HONE ESTINATION _ ANIFEST NO ANIFEST NO	#ICHELLE (213) 783-5928 90-09-842 TRACY (213) 783-5927 LOS ANGELIS 27477 2 4 3 SUMP OIL AND R TREATMENT AND
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